

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	<b>214527462</b>						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> 1.) CORPORATION NAME:  <b>CFA Institute</b>  2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>C. JEANNIE ANDERSON</b>  <b>915 EAST HIGH STREET</b>  <b>CHARLOTTESVILLE, VA</b> </div> <div style="width: 35%;"> DUE DATE: <b>7/31/2014</b>   SCC ID NO: <b>02901643</b>   5.) STOCK INFORMATION  <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED				
CLASS	AUTHORIZED							
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>ALBEMARLE COUNTY</b>								
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>								
6.) PRINCIPAL OFFICE ADDRESS:  <div style="text-align: center;"> ADDRESS: 915 EAST HIGH STREET   CITY/ST/ZIP: CHARLOTTESVILLE, VA 22902 </div>								
7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%;"></td> <td style="width: 20%; text-align: center;"><input checked="" type="checkbox"/> OFFICER</td> <td style="width: 25%; text-align: center;"><input checked="" type="checkbox"/> DIRECTOR</td> </tr> <tr> <td> NAME: JOHN D ROGERS  TITLE: P/CEO  ADDRESS: CFA INSTITUTE  CITY/ST/ZIP/CO: 560 RAY C. HUNT DR.  CHARLOTTESVILLE, VA 22903 </td> <td></td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	NAME: JOHN D ROGERS TITLE: P/CEO ADDRESS: CFA INSTITUTE CITY/ST/ZIP/CO: 560 RAY C. HUNT DR. CHARLOTTESVILLE, VA 22903		
	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
NAME: JOHN D ROGERS TITLE: P/CEO ADDRESS: CFA INSTITUTE CITY/ST/ZIP/CO: 560 RAY C. HUNT DR. CHARLOTTESVILLE, VA 22903								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%;"></td> <td style="width: 20%; text-align: center;"><input checked="" type="checkbox"/> OFFICER</td> <td style="width: 25%; text-align: center;"><input checked="" type="checkbox"/> DIRECTOR</td> </tr> <tr> <td> NAME: AARON LOW  TITLE: VICE CHAIRMAN  ADDRESS: LUMEN ADVISORS. 30 CECIL ST.  CITY/ST/ZIP/CO: , , FN </td> <td></td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	NAME: AARON LOW TITLE: VICE CHAIRMAN ADDRESS: LUMEN ADVISORS. 30 CECIL ST. CITY/ST/ZIP/CO: , , FN		
	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
NAME: AARON LOW TITLE: VICE CHAIRMAN ADDRESS: LUMEN ADVISORS. 30 CECIL ST. CITY/ST/ZIP/CO: , , FN								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%;"></td> <td style="width: 20%; text-align: center;"><input checked="" type="checkbox"/> OFFICER</td> <td style="width: 25%; text-align: center;"><input checked="" type="checkbox"/> DIRECTOR</td> </tr> <tr> <td> NAME: ALAN M. MEDER, CFA  TITLE: PAST CHAIRMAN  ADDRESS: DUFF &amp; PHELPS INVESTMENT MNGT.  CITY/ST/ZIP/CO: 200 S. WACKER DR., SUITE 500  CHICAGO, IL 60606 </td> <td></td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	NAME: ALAN M. MEDER, CFA TITLE: PAST CHAIRMAN ADDRESS: DUFF & PHELPS INVESTMENT MNGT. CITY/ST/ZIP/CO: 200 S. WACKER DR., SUITE 500 CHICAGO, IL 60606		
	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
NAME: ALAN M. MEDER, CFA TITLE: PAST CHAIRMAN ADDRESS: DUFF & PHELPS INVESTMENT MNGT. CITY/ST/ZIP/CO: 200 S. WACKER DR., SUITE 500 CHICAGO, IL 60606								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%;"></td> <td style="width: 20%; text-align: center;"><input checked="" type="checkbox"/> OFFICER</td> <td style="width: 25%; text-align: center;"><input checked="" type="checkbox"/> DIRECTOR</td> </tr> <tr> <td> NAME: CHARLES J. YANG  TITLE: CHAIRMAN  ADDRESS: T&amp;D ASSET MNGT., 1-2-3 KAIGAN  CITY/ST/ZIP/CO: , , FN </td> <td></td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	NAME: CHARLES J. YANG TITLE: CHAIRMAN ADDRESS: T&D ASSET MNGT., 1-2-3 KAIGAN CITY/ST/ZIP/CO: , , FN		
	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
NAME: CHARLES J. YANG TITLE: CHAIRMAN ADDRESS: T&D ASSET MNGT., 1-2-3 KAIGAN CITY/ST/ZIP/CO: , , FN								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%;"></td> <td style="width: 20%; text-align: center;"><input checked="" type="checkbox"/> OFFICER</td> <td style="width: 25%; text-align: center;"><input type="checkbox"/> DIRECTOR</td> </tr> <tr> <td> NAME: JOSEPH P. LANGE  TITLE: SECRETARY  ADDRESS: CFA INSTITUTE  CITY/ST/ZIP/CO: 560 RAY C. HUNT DR.  CHARLOTTESVILLE, VA 22903 </td> <td></td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	NAME: JOSEPH P. LANGE TITLE: SECRETARY ADDRESS: CFA INSTITUTE CITY/ST/ZIP/CO: 560 RAY C. HUNT DR. CHARLOTTESVILLE, VA 22903		
	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR						
NAME: JOSEPH P. LANGE TITLE: SECRETARY ADDRESS: CFA INSTITUTE CITY/ST/ZIP/CO: 560 RAY C. HUNT DR. CHARLOTTESVILLE, VA 22903								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%;"></td> <td style="width: 20%; text-align: center;"><input checked="" type="checkbox"/> OFFICER</td> <td style="width: 25%; text-align: center;"><input type="checkbox"/> DIRECTOR</td> </tr> <tr> <td> NAME: TIMOTHY G MCLAUGHLIN  TITLE: MGR DIR/CFO  ADDRESS: CFA INSTITUTE  CITY/ST/ZIP/CO: 560 RAY C. HUNT DR.  CHARLOTTESVILLE, VA 22903 </td> <td></td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	NAME: TIMOTHY G MCLAUGHLIN TITLE: MGR DIR/CFO ADDRESS: CFA INSTITUTE CITY/ST/ZIP/CO: 560 RAY C. HUNT DR. CHARLOTTESVILLE, VA 22903		
	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR						
NAME: TIMOTHY G MCLAUGHLIN TITLE: MGR DIR/CFO ADDRESS: CFA INSTITUTE CITY/ST/ZIP/CO: 560 RAY C. HUNT DR. CHARLOTTESVILLE, VA 22903								

NAME:	SAEED M. AL-HAJERI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	ADIA BLDG., 211 CORNICHE ST.		
CITY/ST/ZIP/CO:	, , FN		
NAME:	GIUSEPPE BALLOCCI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PICTET & CIE, BANQUIERS, ROUTE DES ACACIAS 60		
CITY/ST/ZIP/CO:	, , FN		
NAME:	HEATHER BRILLIANT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	MORNINGSTAR, 22 W. WASHINGTON		
CITY/ST/ZIP/CO:	CHICAGO, IL 60602		
NAME:	BETH HAMILTON-KEEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	MAWER INVESTMENT MNGT., 603-7 AVENUE SW		
CITY/ST/ZIP/CO:	, , FN		
NAME:	ROBERT JENKINS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	FLAT J, 31 RANDOLPH AVE.		
CITY/ST/ZIP/CO:	, , FN		
NAME:	JAMES G. JONES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	STERLING INVESTMENT ADVISORS, 2095 S. BOSTON		
CITY/ST/ZIP/CO:	BOLIVAR, MO 65613		
NAME:	ATTILA KOKSAL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	STANDARD UNLU A.S., B BLK NO:1 KAT:1		
CITY/ST/ZIP/CO:	, , FN		
NAME:	MARK LAZBERGER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	COLONIAL FIRST STATE GLOBAL ASSET MNGT., LEVE		
CITY/ST/ZIP/CO:	, , FN		
NAME:	FREDERIC P. LEBEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	HFS HEDGE FUND SELECTION S.A., CHEMIN DES RAN		
CITY/ST/ZIP/CO:	, , FN		
NAME:	COLIN W. MCLEAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	SVM ASSET MNGT., 7 CASTLE ST.		
CITY/ST/ZIP/CO:	, , FN		
NAME:	MATTHEW H. SCANLAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	RS INVESTMENTS, 388 MARKET ST., SUITE 1700		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94111		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JANE SHAO DIRECTOR LUMIERE PAVILIONS, 105 YAOJIAYUAN RD. , , FN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUNIL SINGHANIA DIRECTOR RELIANCE MUTUAL FUND, JUPITER MILLS, ELPHINST , , FN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROGER URWIN DIRECTOR TOWERS WATSON, LONDON ROAD , , FN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JOHN D ROGERS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOHN D ROGERS, P/CEO PRINTED NAME AND CORPORATE TITLE	5/28/2014 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			